	•-		Application or Docket Number										
	PATENT	APPLICATIO Effect	10/730 195										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR.	OTHER	
TOTAL CLAIMS			1		·			RATE	= 1	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			// minus 20=		•			X\$ 9=			OR	X\$18=	·
INDEPENDENT CLAIMS			/ minus 3 =		* ·			X43=			ОЯ	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					.145-			1	. 200	
* If the difference in column 1 is less than zero, enter "0" in column 2								+145= TOTAL			OR	+290=	;;; <u>;</u>
	,										OR	TOTAL	7/0
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	L E	NTITY	OR	OTHER SMALL	
AMENDMENT A	1-26-65	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO	EST BER JUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. //	Minus	* 1	D	=		XS 9=		-	OR	X\$18=	
	Independent	* /	Minus	***	3	=	1 t	X43=	1		OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>!</b>	4.45	7			. 200	
<del>-1-18</del> 19								+145=			OR	+290= TOTAL	
	•								EE		OR	ADDIT. FEE	
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							<del></del>	_	4551			100
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE:		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	<del>sirih</del>		= .	lt	X43=	1		OR	X86=	•
<i>'</i> .	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 1 AE -	1		ı	+290 <u>÷</u>	
							L	+145= TOTA			OR	TOTAL	
									Ē		OR ,	ADDIT. FEE	
· · · · ·	1	(Column 1) CLAIMS		(Colum		(Column 3)					•		
ENT C	•	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=		X43=	†		OR	X86=	-
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+290=	
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		ber Previously Paid					r foun	d in the a	appr	opriate box	in con	ımn 1.	